TY NAME: BASF Corp.							
TY ID (PREMISE NUMBER)	: 02-47-04-0195						
TY ADDRESS: 120 Pine Str	reet, Elyria, OH 44035						
e or most recent modificatio	n date: 07/27/01						
<b>ERLY</b> Reporting Period			eriod (please indicate ${\tt AN/A@}$ below in the ${\tt AFrom@}$ and ude semiannual deviation reporting)				
NA	To: NA	From: 07/01/13	To: 12/31/13				
ages in <u>report,</u> including this	one: 60 pages						
list any supporting attachme	ents						
ng deadline: 07/31/2013							

NOTE: The deviation reporting period shall be stated in the following format: Axx/xx/xx through zz/zz/zz@ where xx/xx/xx and zz/zz/zz are the beginning and end dates for the deviation reporting period respectively.

#### SIGNATURE FOR STATEMENT

This statement shall be signed by the responsible official as defined in OAC rule 3745-77-01(GG). Making of any false material statement, representation or certification constitutes

a violation of ORC 3704.05(H), and subjects the responsible party signing this statement to civil and/or criminal penalties as provided in ORC 3704.06(C) and ORC 3704.

#### CERTIFICATION

Based on information and belief formed after reasonable inquiry, I hereby affirm, as stated in OAC rule 3745-77-03(D), that the statements and information as transmitted in this

Title V report are true, accurate and complete to the best of my knowledge.

Authorized Signature		Date		
Name (Please Print)		Title		
	tal Protection Agency Section I- Page 2 ng			
ACILITY NAME: BASF Corp.				
ACILITY ID (PREMISE NUMBE	ER): 02-47-04-0195			
ACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035			
ssuance or most recent modifica	ation date: 07/27/01			
QUARTERLY Reporting Period		<b>SEMIANNUAL</b> Reporting Period (please indicate "N/A" below in the "From" and "To" fields if t report does include semiannual deviation reporting)		
rom: NA	To: NA	From: 07/01/13		To: 12/31/13
Reporting deadline: 07/31/2013				

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE	NUMBER)		
FACILITY ADDRESS			
Issuance or most recent	modification date		
QUARTERLY Reporting Period			ng Period (please indicate AN/A@ below in the AFr semiannual deviation reporting)
From:	То:	From:	То:
Reporting deadline			

#### SECTION I -

### 704.05(H), PART I General Terms and Conditions (Permit Requirement Reporting) (Table1)

Mark the following box with an >X= if no General Terms and Conditions deviations occurred

#### THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART I OF THE TITLE V PERMIT DURING THE REPORTING PERIOD

Add rows as necessary to the following table for reported deviations (one for each General Term as applicable; see detailed instructions for more information) (Table2)

		<u> </u>						
PERMIT RM scription	Reporting Requirement (choose one)		ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIC	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTION PREVENTATIVE MEASURE	
	Quarterly	Semi- Annual	I	DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

TVDEVIATIONV1.DOC 11/2005

Ohio Environmental Protection Agency Deviation Reporting

FACILITY NAME			
FACILITY ID (PREMISE NUME	BER)		
FACILITY ADDRESS			
Issuance or most recent modifi	cation date		
QUARTERLY Reporting Period		<b>SEMIANNUAL</b> Reporting Period (please in this report does include semiannual deviation)	
From:	То:	From:	То:
Reporting deadline			

PERMIT RM Reporting Requirement (choose one)			<u> </u>		DEVIATION INFORMATIO	PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIO PREVENTATIVE MEASURE	
·	Quarterly Semi- Annual			DEVIATION DURATION		DESCRIPTION AND MAGNITUDE OF THE DEVIATION		
				DATE / TIME START	DATE / TIME END			

Ohio Environmental Protection Agency Section II- Page 1

Deviation	Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	eet, Elyria, OH 44035		
Issuance or most recent modification	n date: 07/27/01		
QUARTERLY Reporting Period	QUARTERLY Reporting Period		riod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA To: NA		From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

#### <u>Section II - Part II Facility-wide Permit Requirement Reporting</u> Insignificant Emissions Unit Negative Declarations (Table1)

List each insignificant emissions unit where no deviations of any PTI terms or applicable requirements for the listed emissions unit occurred, or add rows as necessary to the deviation reporting table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

VERE NO DEVIATIONS OF <u>ANY</u> PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II., LE V PERMIT:

color tray dying (E-5)

trays dryers, littleford mixer (E-31)

HC-11 tanks (E-53)

TCP blend & slugger (E-61)

ceramic color dryer #9 (E-83)

waste shredder (E-80)

Deviation Reporting			
FACILITY NAME: BASF	Corp.		
FACILITY ID (PREMISE	NUMBER): 02-47-04-0195		
FACILITY ADDRESS: 1:	20 Pine Street, Elyria, OH 44035		
Issuance or most recent	modification date: 07/27/01		
QUARTERLY Reporting	Period		iod (please indicate AN/A@ below in the AF de semiannual deviation reporting)
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/3	1/2013		•

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II. I LE V PERMIT:

general catalyst dryers #4, #5 (E-86)

nitric acid dilution (E-87)

ZR sinter furnace (E-89)

ammonia stripper in WWTP (E-93)

12 inch rotary calciner (E-95)

fast fire kiln (E-90)

reduction towers (E-98)

elevator kilns (E-96)

#6 rotary calciner (E-97)

FACILITY NAME: BASF Corp			
FACILITY ID (PREMISE NUMI	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pir	ne Street, Elyria, OH 44035		
Issuance or most recent modif	ication date: 07/27/01		
QUARTERLY Reporting Perio	· •		riod (please indicate AN/A@ below in the AFr de semiannual deviation reporting)
From: NA	From: NA To: NA		To: 12/31/13
Reporting deadline: 07/31/201	3		

VERE NO DEVIATIONS OF ANY PTI TERMS OR APPLICABLE REQUIREMENTS FOR THE FOLLOWING LISTED INSIGNIFICANT EMISSIONS UNITS IDENTIFIED IN PART II./

1.E V PERMIT:

Black furnaces (E-99)

Horne tableting machines (E-102)

sulfuric acid storage tank

Kewanee boiler, rated at 8.6 MMBtu/hr

Ohio Environmental Protection Agency Section II- Page 2

**Deviation Reporting** 

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUME	BER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pin	e Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Period	QUARTERLY Reporting Period		od (please indicate AN/A@ below in the AFr e semiannual deviation reporting)
From: NA	To: NA	From: 07/01/12	To: 12/31/13

### <u>Facility-wide Permit Requirements Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (mark with an >X= if applicable)</u> (Table 2)

THERE WERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART II OF THE TITLE V PERMIT DURING THE REPORTING PERIOD SPECIFIED IN THIS REPORT

### Section II - Part II Facility-wide and/or IEU permit requirement (Permit Requirement Reporting) - Deviation Reporting (Table 3)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information)

r IEU T iption	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALFUN WRIT REPOF DATE (If no reports
is for	Quarterly	Quarterly Semi- Annual DEVIATION DURATION			DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION ? (Yes or No - If Yes, continue to the next column)	• •	state ANO R in the space	
				DATE / TIME START	DATE / TIME END	DEVIATION			the flext column)		
		'									

FACILITY NAME: BASF Corp.		
FACILITY ID (PREMISE NUMB	BER): 02-47-04-0195	
FACILITY ADDRESS: 120 Pine	e Street, Elyria, OH 44035	
Issuance or most recent modific	cation date: 07/27/01	
QUARTERLY Reporting Period	1	 od (please indicate AN/A@ below in the AFr e semiannual deviation reporting)
QUARTERLY Reporting Period From: NA	To: NA	 ••

r IEU T iption is for	Reporting Requirement (choose one) Or both ACTUAL METHOD USED TO DETERMINE COMPLIANCE			DEVIATION INFORMATION			CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made,	MALFUN WRIT REPOF DATE (If no reports	
	Quarterly	Semi- Annual			IATION ATION	DESCRIPTION AND MAGNITUDE OF THE			? (Yes or No - If Yes, continue to the next column)	state ANO REPORTS@ in the space below)	state ANO R in the spac
				DATE / TIME START	DATE / TIME END	DEVIATION					

Ohio Environmental Protection Agency Section III- Page 1

**Deviation Reporting** 

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
· · ·			od (please indicate AN/A@ below in the AFroe e semiannual deviation reporting)
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

### Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Negative Declarations (Table 1)

List each emissions unit where no deviations of any terms for the listed emissions unit occurred, or add rows as necessary to the second table (see next page) for reported deviations (one for each term as applicable; see detailed instructions for more information)

### VERE NO DEVIATIONS OF ANY OF THE TERMS AND CONDITIONS OF PART III OF THE TITLE V PERMIT FOR THE FOLLOWING LISTED EMISSIONS UNITS:

Emissions Unit ID	Please place an >X= below if there were no Quarterly Deviations - If an >X= is not indicated, the deviation(s) must be identified in Table2 below	If applicable, please place an >X= below if there no Semiannual Deviations - If an >X= is not indithe deviation(s) must be identified in Table2 b		
2 BOILER (E-91))		X		
ER COLOR BLENDING (E-6))		X		
ER COLOR MILLING (E-7))		X		
U/BI CALCINERS (E-26))		X		

FACILITY NAME: BASF	Corp.		
FACILITY ID (PREMISE I	NUMBER): 02-47-04-0195		
FACILITY ADDRESS: 12	20 Pine Street, Elyria, OH 44035		
Issuance or most recent r	modification date: 07/27/01		
QUARTERLY Reporting	Period		od (please indicate AN/A@ below in the AFrom t
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31	1/2013		

EN CAT MIXERS (E-29))	X
ER COLOR BLEND AND MILL (E-34))	X
ICKEL TABLET SYSTEM (E-57))	X
RON ROOM TABLET)	X
ER COLOR PULVERIZER (E-62))	X
OLOR JETMILL (E-94))	X
OLV DRY AND VERT CALC (E-75))	X
&S DRIER IN HC-11)	X
HUTTLE KILN #1 (E-88))	X

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pin	e Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Perior	QUARTERLY Reporting Period		od (please indicate AN/A@ below in the AFroe semiannual deviation reporting)
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013	3		

1	
2 SHUTTLE KILN (E-92))	X
OPPER CALCINER #2)	X
LDG 24 WEST TABLETTING)	Х
LDG 25 EAST TABLETTING)	Х
UNNEL KILN #3)	 Х
RON CATALYST MIXING (E-104))	Х
RAVITY BED SEPERATOR)	Х
ATIONAL DRYER)	Х

Ohio Environmental Protection Agency Section III- Page 2

**Deviation Reporting** 

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	d
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

### Section III - Part III Emissions Unit Terms and Conditions (Permit Requirement Reporting) - Deviation Reporting (Table2)

Add rows as necessary to the following table for reported deviations (one for each Term as applicable; see detailed instructions for more information). Please group deviations for each emissions unit that has deviations of multiple torms.

	information) - Please g	∤roup dev	iations for	r each emission	is unit that	nas devia	itions of multi	pie terms.				
NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D	
w)		Quarterly	Semi- Annual			ATION ATION DATE/TIM E END	DESCRIPTION AND MAGNITUDE OF THE DEVIATION			MALFUNCTION ? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REP the sp

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pin	e Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Period	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) both	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION ? (If no reports were (Yes or No - If made, state ANO Yes, continue to REPORTS @ in the the next column) space below)		to we
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the s
<b>∕</b> it	General Terms and Conditions B. I		×	Records Review	07/01/13	12/31/13	Operated 7 Sources without a PTI	Facility personnel change over and inadequate Title V training	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBI	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modific	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIOI			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp
, n	A.III.1.a-Collect and record the pressure drop across the scrubber, in inches of water, once each day.		×	Records of pressure drop readings	09/13/13	09/13/13	A total of 1 daily ΔP records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Stre	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion W)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) ooth Semi- Annual	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION DURATION  DATE/TIME DATE/TIM			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION? (Yes or No - If Yes, continue to the next column)	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were made, state ANO REPORTS@ in the space below)	MALI W RE D (If r we sta REF the sa
					START	E END	DEVIATION					
) R	A.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	09/13/13	09/13/13	A total of 1 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBI	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modific	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D	
		Quarterly	Semi- Annual	l l		DEVIATION DES				MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	MAGNITUDE OF THE DEVIATION			the next column	space below)	the s
at ers 3)	A.III.1- Perform daily Viron scrubber water flow checks checks, when the emissions unit is in operation		×	Daily record of Viron scrubbers 2 and 3 water flow	08/19/13	08/25/13	A total of 14 VE checks were not performed during the reporting period.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification d	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	d
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATIO			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A MALFUNCTION?	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE: D (If r
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			(Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	we sta REP
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	Space below)	the s
der	B.III.1.b- Collect and record the scrubber water flow rate, in gallons per minute, once each day.		×	Records of scrubber water flow rate	01/10/13	01/10/13	A total of 1 daily scrubber water flow rate records are missing.	Facility personnel change over and inadequate Title V training processes.	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBI	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modific	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the space below)	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the heat column)	space below)	the s
) der	B.III.2-Record the pressure drop across the baghouse on a daily basis.		×	Records of daily pressure drop readings for the baghouse	08/19/13	08/21/13	A total of 3 daily ΔP records are missing.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUME	3ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pin	e Street, Elyria, OH 44035		
Issuance or most recent modifi	cation date: 07/27/01		
QUARTERLY Reporting Period	d	SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013	3		

NS J) otion w)	TITLE V PERMIT TERM NO & Description	TERM Reporting Requirement US O & Description (choose one) DE7		ACTUAL METHOD USED TO DETERMINE COMPLIANCE	DEVIATION INFORMATION			PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual			ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (Yes or No - If Yes, continue to the next column)	(If no reports were made, state ANO REPORTS@ in the	(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column	space below)	the sp
) der	B.III.2-Record the pressure drop across the baghouse on a daily basis.		×	Records of daily pressure drop readings for the baghouse	08/24/13	08/25/13	A total of 2 daily ΔP records are missing.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations	No	No	

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBI	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modific	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIO		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION ? (If no reports we (Yes or No - If made, state AN Yes, continue to REPORTS@ in to the continue to		(If r we sta REF
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s
) der	B.III.2-Record the pressure drop across the scrubber on a daily basis.		×	Records of daily pressure drop readings for the scrubber	08/19/13	08/21/13	A total of 3 daily ΔP records are missing.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

. 9		T	
FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street,	Elyria, OH 44035		
Issuance or most recent modification da	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Period	
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	(choos	Requirement se one) poth	ACTUAL METHOD USED TO DETERMINE COMPLIANCE		DEVIATION INFORMATIOI				DEVIATION INFORMATION				PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION ? (If no reports we made, state AN Yes, continue to REPORTS@ in t		(If r we sta REF						
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the sp						
) der	B.III.2-Record the pressure drop across the scrubber on a daily basis.		×	Records of daily pressure drop readings for the scrubber	08/24/13	08/25/13	A total of 2 daily ΔP records are missing.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No							

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBI	ER): 02-47-04-0195		
FACILITY ADDRESS: 120 Pine	Street, Elyria, OH 44035		
Issuance or most recent modific	ation date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	Reporting Requirement (choose one) or both		one) DETERMINE		DEVIATION INFORMATION		PROBABLE CORRECTIVE CAUSE FOR ACTIONS / THE PREVENTATIVE DEVIATION MEASURES TAKEN	ACTIONS / PREVENTATIVE	ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S)	MALI W RE. D
		Quarterly	Semi- Annual		DEVIA DURA	ATION ATION	DESCRIPTION AND MAGNITUDE			MALFUNCTION? (If no reports w. (Yes or No - If Yes, continue to the next column) space below		(If r we sta REF	
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			the next column)	space below)	the s	
) der	B.III.2-Water flow to scrubber		×	Records of daily scrubber water flow readings	08/19/13	08/21/13	A total of 3 daily ΔP records are missing.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No		

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER):	02-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	et, Elyria, OH 44035		
Issuance or most recent modification	date: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

NS J) otion w)	TITLE V PERMIT TERM NO & Description	TERM Reporting Requirement USED TO INFORMATION		PROBABLE CAUSE FOR THE DEVIATION	CORRECTIVE ACTIONS / PREVENTATIVE MEASURES TAKEN	WAS THIS DEVIATION ATTRIBUTABLE TO A	MALFUNCTION VERBAL REPORT(S) DATE(S) (If no reports were	MALI W RE. D				
		Quarterly	Semi- Annual		DEVIA DURA		DESCRIPTION AND MAGNITUDE		MALFUNCTION? (Yes or No - If Yes, continue to the next column)	made, state ANO REPORTS@ in the space below)	(If r we sta REF	
					DATE/TIME START	DATE/TIM E END	OF THE DEVIATION			une ment columny	space selen)	the s
) der	B.III.2-Water flow to scrubber		×	Records of daily scrubber water flow readings	08/19/13	08/21/13	A total of 3 daily ΔP records are missing.	Loss of records	A Title V compliance plan and training program are currently being implemented across all process operations.	No	No	

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Deviation Reporting

FACILITY NAME: BASF Corp.			
FACILITY ID (PREMISE NUMBER): 02	2-47-04-0195		
FACILITY ADDRESS: 120 Pine Street	, Elyria, OH 44035		
Issuance or most recent modification da	ate: 07/27/01		
QUARTERLY Reporting Period		SEMIANNUAL Reporting Perio	od
From: NA	To: NA	From: 07/01/13	To: 12/31/13
Reporting deadline: 07/31/2013			

See page 3 of the instructions A SECTION III ADDITIONAL DETAILED INSTRUCTIONS FOR COMPLETING A DEVIATION REPORTING TABLE of for guidance on this table.